

	National Aerono	outics and Space	Administration		Form Approved			2a. Report for Month Ending		2b. Operating days/hrs for month	
MONTH	Y CONTRACTO	R FINANCIAL N	MANAGEMENT	REPORT	O. M. B. N	o. 2700-003					
To:				From:							
NASA			CCR Test Team			3. Authorized Contract Value					
							a. Cost		b. Fee *		
	a. Type CPAF/IF			b. Contract# & Latest Definitized Modification #			Fund Limitation				
1. Description									Billing		
of Contract	·k		d. Signature of	Authorized Rep.	Date	5a. Invoice Amounts Billed		5b. Total Payments Received			
	'			User name Today's date					,		
\$IN K	7. Cost Incurred/Hours Worked				8. Estimated Cost/Hours to Complete (1)			9. Est. Final Cost/Hrs			
	During the Month Cumulat			tive to Date		Detail(1)					
										10. Unfilled	
6. Reporting Category	Actual	Planned	Actual	Planned	Oct	Nov	Balance of (1)	Contractor (2)	Authorized	Orders	
Total Program							Contract	Estimate	Contract	Outstanding	
Cost Summary	a.	b.	C.	d.	a.	b.	d.	a.	Value b.		
Labor Hours	220	240	220	240	280	300		5,800	5,800	0	
Labor Dollars	200,000	240,000	200,000	240,000	260,000	300,000	1,240,000	2,000,000	2,000,000	0	
Overhead	100,000	75,000	100,000	75,000	85,000	100,000	465,000	750,000	750,000	0	
Travel	75,000	75,000	75,000	75,000	8,000	5,000	762,000	850,000	850,000	0	
Material	125,000	100,000	125,000	100,000	100,000	190,000	485,000	900,000	900,000	0	
Purchased Services	150,000	125,000	150,000	125,000	100,000	80,000	120,000	450,000	450,000	0	
Subcontract	0	0	0	0	67,000	75,000	608,000	750,000	750,000	0	
Other Direct Costs	200,000	190,000	200,000	190,000	90,000	50,000	160,000	500,000	500,000	0	
General & Administrative	125,000	120,000	125,000	120,000	70,000	30,000	75,000	300,000	300,000	0	
Award Fee	25,000	25,000	25,000	25,000	20,000	20,000	135,000	200,000	200,000	0	
Total Cost	1,000,000	950,000	1,000,000	950,000	800,000	850,000	4,050,000	6,700,000	6,700,000	0	

MONTHI	Form Approved <b>REPORT</b> O. M. B. No. 2700-003			2a. Report for Month Ending December 31, 2002		2b. Operating days/hrs for month 18 days					
To:				From:							
NASA/Center				CCR Training Contractor			3. Authorized Contract Value				
						a. Cost \$6,500,000		b. Fee * \$200,000			
	a. Type			b. Contract# & I	Latest Definitized M	Modification #	4. Fund Limitation		\$2,500,000		
1. Description	CPAF/IF			NAS3-820	XX Basic		5. Billing				
of Contract	c. Scope of Wor	rk		d. Signature of Authorized Rep. Date			5a. Invoice Amounts Billed		5b. Total Payments Received		
	Contract Summary			John H. Smith Jan. 15, 2003			\$0.00		\$0.00		
Whole \$	7. Cost Incurred/Hours Worke				8. Estimated Cost/Hours to Complete			9. Est. Final Cost/Hrs		ost/Hrs	
	During the Month Cumulat			tive to Date	o Date Detail(1)						
Reporting Category     Total Program	Actual	Plannned	Actual	Planned	Jan	Feb	Balance of (1) Contract	Contractor (2) Estimate	Authorized Contract	10. Unfilled Orders	
Cost Summary	a.	b.	C.	d.	a.	b.	d.	a.	Value b.	Outstanding	
Labor Hours	220	240	220	240	280	300	5,000	5,800	5,800	0	
Labor Dollars	200,000	240,000	200,000	240,000	260,000	300,000	1,240,000	2,000,000	2,000,000	0	
Overhead	100,000	75,000	100,000	75,000	85,000	100,000	465,000	750,000	750,000	0	
Travel	75,000	75,000	75,000	75,000	8,000	5,000	762,000	850,000	850,000	0	
Material	125,000	100,000	125,000	100,000	100,000	190,000	485,000	900,000	900,000	0	
Purchased Services	150,000	125,000	150,000	125,000	100,000	80,000	120,000	450,000	450,000	0	
Subcontract	0	0	0	0	67,000	75,000	608,000	750,000	750,000	0	
Other Direct Costs	200,000	190,000	200,000	190,000	90,000	50,000	160,000	500,000	500,000	0	
General & Administrative	125,000	120,000	125,000	120,000	70,000	30,000	75,000	300,000	300,000	0	
Award Fee	25,000	25,000	25,000	25,000	20,000	20,000	135,000	200,000	200,000	0	
Total Cost	1,000,000	950,000	1,000,000	950,000	800,000	850,000	4,050,000	6,700,000	6,700,000	0	